



Attorney Docket No. 0933-0214P

BIRCH, STEWART, KOLASCH & BIRCH, LLP

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P.O. Box 747 • Falls Church, Virginia 22040-0747
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:

NOVEL HUMAN GENE FUNCTIONALLY RELATED TO DYSLEXIA

Fill in Appropriate

the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:

Information -
For Use Without
Specification
Attached:

The specification was filed on October 9, 2003 as
United States Application Number 10/681,199
and amended on _____ (if applicable) and/or
the specification was filed on _____ as PCT
International Application Number _____; and was
amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

Insert Priority Information: (if appropriate)	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	(Number)	(Country)	(Month/Day/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.

Insert Provisional Application(s): (if any)	60/355,782 (Application Number)	February 12, 2002 (Filing Date)
	(Application Number)	(Filing Date)

All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:

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Insert Prior U.S. Application(s): (if any)	10/364,505 (Application Number)	February 12, 2003 (Filing Date)	Abandoned (Status - patented, pending, abandoned)
	PCT/FI03/00110 (Application Number)	February 12, 2003 (Filing Date)	Filed (Status - patented, pending, abandoned)

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Full Name of First
 or Sole Inventor:
 Insert Name of
 Inventor
 Insert Date This
 Document is Signed

Insert Residence
 Insert Citizenship

Insert Post Office
 Address

Full Name of Second
 Inventor, if any:
 see above

Full Name of Third
 Inventor, if any:
 see above

Full Name of Fourth
 Inventor, if any:
 see above

Full Name of Fifth
 Inventor, if any:
 see above

Full Name of Sixth
 Inventor, if any:
 see above

GIVEN NAME/FAMILY NAME Juha KERE		INVENTOR'S SIGNATURE 	DATE* Nov 27, 2003
Residence (City, State & Country) Stockholm, SWEDEN		CITIZENSHIP Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country) Gästerikegatan 11, 113 62 Stockholm, SWEDEN			
GIVEN NAME/FAMILY NAME Mikko TAIPALE		INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Heidelberg, GERMANY		CITIZENSHIP Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country) Heiligegeiststrasse 11, 69117 Heidelberg, GERMANY			
GIVEN NAME/FAMILY NAME Jaana NOPOLA-HEMMI		INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Helsinki, FINLAND		CITIZENSHIP Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country) Haapalahdenkatu 11 C 20, FIN-00300 Helsinki, FINLAND			
GIVEN NAME/FAMILY NAME Nina KAMINEN		INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country) Helsinki, FINLAND		CITIZENSHIP Finnish	
MAILING ADDRESS (Complete Street Address including City, State & Country) Isonevantie 7-9 C 22, FIN-00320 Helsinki FINLAND			
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(if any)

60/355,782	February 12, 2002
(Application Number)	(Filing Date)

(Application Number)

(Filing Date)

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First
or Sole Inventor:
Insert Name of
Inventor if this
Document is Signed
↓

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Juha KERE		
Residence (City, State & Country)	CITIZENSHIP	
Stockholm, SWEDEN	Finnish	

Insert Residence
Insert Citizenship
↓

MAILING ADDRESS (Complete Street Address including City, State & Country)		
Gästerikegatan 11, 113 62 Stockholm, SWEDEN		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Mikko TAIPALE	<i>Mikko Taipale</i>	Nov 27, 2003
Residence (City, State & Country)	CITIZENSHIP	
Heidelberg, GERMANY	Finnish	

Insert Post Office
Address
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MAILING ADDRESS (Complete Street Address including City, State & Country)		
Heiliggeiststrasse 11, 69117 Heidelberg, GERMANY		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Jaana NOPOLA-HEMMI		
Residence (City, State & Country)	CITIZENSHIP	
Helsinki, FINLAND	Finnish	

Full Name of Third
Inventor, if any:
see above

MAILING ADDRESS (Complete Street Address including City, State & Country)		
Haapalahdenkatu 11 C 20, FIN-00300 Helsinki, FINLAND		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Nina KAMINEN		
Residence (City, State & Country)	CITIZENSHIP	
Helsinki, FINLAND	Finnish	

Full Name of Fourth
Inventor, if any:
see above

MAILING ADDRESS (Complete Street Address including City, State & Country)		
Isonnevantie 7-9 C 22, FIN-00320 Helsinki FINLAND		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Nina KAMINEN		
Residence (City, State & Country)	CITIZENSHIP	
Helsinki, FINLAND	Finnish	

Full Name of Fifth
Inventor, if any:
see above

MAILING ADDRESS (Complete Street Address including City, State & Country)		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	

Full Name of Sixth
Inventor, if any:
see above

MAILING ADDRESS (Complete Street Address including City, State & Country)		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)	CITIZENSHIP	



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Full Name of First
 Inventor, if Inventor:
 Inventor's Name or
 Signature: The
 Document is Signed

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Juha KERE		

Residence
 Inventor's Citizenship

Residence (City, State & Country)	CITIZENSHIP
Stockholm, SWEDEN	Finnish

Residence
 Inventor's Address

MAILING ADDRESS (Complete Street Address including City, State & Country)		
Gästeriksgatan 11, 113 62 Stockholm, SWEDEN		

Full Name of Second
 Inventor, if any:
 see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Mikko TAIPALE		

Residence (City, State & Country)	CITIZENSHIP
Heidelberg, GERMANY	Finnish

MAILING ADDRESS (Complete Street Address including City, State & Country)		
Heiliggeiststrasse 11, 69117 Heidelberg, GERMANY		

Full Name of Third
 Inventor, if any:
 see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Jaana NOPOLA-HEMMI	<i>Jaana Hemmi</i>	December 3, 2003

Residence (City, State & Country)	CITIZENSHIP
Helsinki, FINLAND	Finnish

MAILING ADDRESS (Complete Street Address including City, State & Country)		
Haapalahdenkatu 11 C 20, FIN-00300 Helsinki, FINLAND		

Full Name of Fourth
 Inventor, if any:
 see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Nina KAMINEN		

Residence (City, State & Country)	CITIZENSHIP
Helsinki, FINLAND	Finnish

MAILING ADDRESS (Complete Street Address including City, State & Country)		
Isonnevantie 7-9 C 22, FIN-00320 Helsinki FINLAND		

Full Name of Fifth
 Inventor, if any:
 see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*

Residence (City, State & Country)	CITIZENSHIP

MAILING ADDRESS (Complete Street Address including City, State & Country)		

Full Name of Sixth
 Inventor, if any:
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GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*

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 or Sole Inventor:
 Inventor's Name
 Inventor Date This
 Document is Signed
 →

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Juha KERE		

Insert Residence
 Insert Citizenship →

Residence (City, State & Country)	CITIZENSHIP
Stockholm, SWEDEN	

Insert Post Office
 Address →

MAILING ADDRESS (Complete Street Address including City, State & Country)	
Gästerikegatan 11, 113 62 Stockholm, SWEDEN	

Full Name of Second
 Inventor, if any:
 see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Mikko TAIPALE		

Residence (City, State & Country)	CITIZENSHIP
Heidelberg, GERMANY	

Full Name of Third
 Inventor, if any:
 see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Jaana NOPOLA-HEMMI		

Residence (City, State & Country)	CITIZENSHIP
Helsinki, FINLAND	

Full Name of Fourth
 Inventor, if any:
 see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Nina KAMINEN		December 2, 2003

Residence (City, State & Country)	CITIZENSHIP
Helsinki, FINLAND	

Full Name of Fifth
 Inventor, if any:
 see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		

MAILING ADDRESS (Complete Street Address including City, State & Country)	
Isonnevantie 7-9 C 22, FIN-00320 Helsinki FINLAND	

Full Name of Sixth
 Inventor, if any:
 see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		

MAILING ADDRESS (Complete Street Address including City, State & Country)	